Image# 14970000984 PAGE 1 / 15

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		I All Authorized				Office Us	se Only
NAME OF T COMMITTEE (in full)	YPE OR PRINT		mple: If typing r the lines.	g, type	12FE4	М5	
ORRINPAC							1
ADDRESS (number and street)	PO BOX 3986						
Check if different							
than previously reported. (ACC)	Washington				DC	20027	,
2. FEC IDENTIFICATION NUM	MBER ▼	CITY 🛦			STATE A		ZIP CODE 🛦
C C00235572		3. IS THIS REPORT	N (N	EW I) OR	×	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		lay 20 (M5)	=	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)		un 20 (M6)		Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1) (c) 12-Da	Apr 20 (M4)	Primary (12P)	1 20 (M7)		Oct 20 (M10) eral (12G)	Jan 31 (YE) Runoff (12R)
July 15 Quarterly Report (Q2	PRE-E	Election t for the:	Convention (1	2C)	4	cial (128)	Hulloll (12h)
October 15 Quarterly Report (Q3	· ·	t for the.	Convention (1	20)	Орос	nai (120)	
January 31 Year-End Report (YE		Election on	M M /	D D /	Y Y Y Y	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)		y -Election t for the:	General (30G)	Rund	off (30R)	Special (30S)
Termination Report (TER)	Tiopo.	Election on	M = M /	D = D /	Y	Y	in the State of
5. Covering Period 02	/ D D /	2014	through	M M 02	28	/ Y Y 201	14
I certify that I have examined this	•	•	wledge and b	elief it is tru	e, correct	and complet	te.
Type or Print Name of Treasurer	STANLEY R. DI	E WAAL					
Signature of Treasurer STANL	EY R. DE WAAL		[Electronically	Filed] D		08	
NOTE: Submission of false, erroned	ous, or incomplete	information may su	bject the pers	on signing th	is Report	to the penaltic	es of 2 U.S.C. §437g.
Office Use Only							FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **ORRINPAC** 02 2014 02 28 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 400491.98 January 1, 2014 (b) Cash on Hand at 382619.98 Beginning of Reporting Period..... 37838.27 29500.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 412119.98 438330.25 6(a) and 6(c) for Column B)..... 33063.12 59273.39 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 379056.86 379056.86 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ORRINPAC

(ii) Unitemized	
Than Political Committees (i) Itemized (use Schedule A)	0.00 0.00 0.00 3000.00 0.00 338.27 0.00 34500.00
(ii) Itemized (use Schedule A)	0.00 0.00 0.00 3000.00 0.00 338.27 0.00 34500.00
(ii) Unitemized	0.00 0.00 0.00 3000.00 0.00 338.27 0.00 34500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00 3000.00 0.00 338.27 0.00 34500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00 3000.00 0.00 338.27 0.00 34500.00
Lines 11(a)(i) and (ii)	0.00 338.27 0.00 34500.00
(b) Political Party Committees	0.00 338.27 0.00 34500.00
(c) Other Political Committees (such as PACs)	0.00 34500.00
(c) Other Political Committees (such as PACs)	0.00 34500.00
(such as PACs)	
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	37838.27
Totals to Line 33, page 5)	1,00 37838.27
2. Transfers From Affiliated/Other Party Committees	
Party Committees	
3. All Loans Received	0.00
Description: D	.00
Description: D	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	
6. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00
(Carry Totals to Line 37, page 5)	
6. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00
to Federal Candidates and Other Political Committees	0.00
Political Committees	
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00
(Dividends, Interest, etc.)	
B. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	.00 0.00
(a) Non-Federal Account (from Schedule H3)	.00
(from Schedule H3)	
(b) Levin Funds (from Schedule H5)	.00 0.00
	0.00
(c) Total Transfers (add 18(a) and 18(b))	
(c) Total Transiers (add Tota) and Tots))	0.00
	0.00
Total Receipts (add Lines 11(d),	
12, 13, 14, 15, 16, 17, and 18(c))▶	37020 27
). Total Federal Receipts (subtract Line 18(c) from Line 19)▶ 295	0.00 37838.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: - (a) Allocated Federal/Non-Federal	10101 11110 1 01100	Calelidai Teal-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(") N 5 1 101	0.00	0.00		
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00		
Expenditures	18063.12	29273.39		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b))►	18063.12	29273.39		
Transfers to Affiliated/Other Party				
Committees Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	5000.00	20000.00		
Independent Expenditures	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	7	7		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other		0.00		
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
- (I) Table Continues B. Continues				
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00		
(add Lines 20(a), (b), and (c),				
Other Disbursements	10000.00	10000.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)		200		
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely				
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add				
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	33063.12	59273.39		
Total Foderal Dishursesses				
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	33063.12	59273.39		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	29500.00	37838.27
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29500.00	37838.27
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	18063.12	29273.39
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	18063.12	29273.39

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 15 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) ORRINPAC Full Name (Last, First, Middle Initial) Patricia L. Deloatche Date of Receipt Mailing Address 313 South Fernwick Street 2014 02 24 City Zip Code State Transaction ID: 40312.C4559 VA **ARLINGTON** 22204 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Receipt Name of Employer Occupation Sidley Austin Policy Advisor Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Greg Elliot Date of Receipt Mailing Address 1101 Johnson Road 02 24 2014 City State Zip Code Transaction ID: 40312.C4557 **CHARLESTON** WV 25314 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Receipt Name of Employer Occupation American Medical Facilities **OWNER** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... 1500.00 TOTAL This Period (last page this line number only).....

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 OF 15					
ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)					
• • •	EIVIIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12					
				13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
\setminus	NAME OF COMMITTEE (In Full)								
\rangle	ORRINPAC								
Α.	Full Name (Last, First, Middle Initial) PHYSICAL THERAPY PAC, PT-PAC			Date of Receipt					
	Mailing Address 1111 N. FAIRFAX STREET			02 24 2014					
	City	State	Zip Code	Transaction ID: 40312.C4561					
	ALEXANDRIA	VA	22314	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0012880	5000.00					
	Name of Employer	Occupation	1	Receipt					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		5000.00						
	Carior (opeony) 🔻								
— В.	Full Name (Last, First, Middle Initial) AMERICAN HEALTH CARE ASSOC	IATION F	PAC	Date of Receipt					
	Mailing Address 1201 L ST, NW	02 07 2014							
	City	State	Zip Code	Transaction ID : 40217.C4552					
	WASHINGTON	DC	20005	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C cod	0006080	5000.00					
	Name of Employer	Occupation	1	Receipt					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		5000.00						
<u> </u>	Full Name (Last, First, Middle Initial) GENERAL ELECTRIC COMPANY	PAC		Date of Receipt					
•	Mailing Address 1299 PENNSYLVANIA AVE, N			M = M / D = D / Y = Y = Y					
	City	State	Zip Code	02 24 2014 Transaction ID : 40312.C4560					
	WASHINGTON	DC	20004	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0024869	1000.00					
	Name of Employer	Occupation		Receipt					
	Receipt For:	Aggregate	Year-to-Date ▼	-					
	Primary General		1000.00						
	Other (specify) ▼		1000.00						
г									
,	UBTOTAL of Receipts This Page (optional)			11000.00					
dash	ODITION OF THOOHER THIS I age (optional)			7 7					

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 15 (check only one)
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and Stor for commercial purposes, other than using the	atements mand a	ay not be sold or used by any peaddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) ORRINPAC			
Full Name (Last, First, Middle Initial) A. AMERICAN ASSN OF NURSE ANEST Mailing Address 25 MASSACHUSETTS AVENU SUITE 550 City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) ALTRIA GROUP, INC. PAC Mailing Address 101 CONSTITUTION AVE, NW SUITE 400W City	State DC CO Occupation Aggregate	Zip Code 20001 0173153 Year-to-Date ▼ 1000.00	Date of Receipt M
WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation	20001 0089136 1 Year-to-Date ▼ 2500.00	Amount of Each Receipt this Period 2500.00 Receipt
Full Name (Last, First, Middle Initial) KOCH INDUSTRIES, INC PAC Mailing Address 600 14TH ST NW, STE 800 City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation	Zip Code 20005 0236489 Year-to-Date ▼	Date of Receipt 02 07 2014 Transaction ID: 40217.C4550 Amount of Each Receipt this Period 1500.00 Receipt
SUBTOTAL of Receipts This Page (optional)		·····	5000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 15 (check only one) 11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) ORRINPAC	tatements may not be sold or used by an name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Unisys Corporation Employees PAC Mailing Address 11720 Plaza America Dr. City RESTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code VA 20190 C C00345603 Occupation Aggregate Year-to-Date ▼	Date of Receipt O2 17 2014 Transaction ID: 40220.C4554 Amount of Each Receipt this Period 1000.00 Receipt
Full Name (Last, First, Middle Initial) S Corporation Association PAC Mailing Address 805 15th Street, NW Suite 650 City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code DC 20005 C C00493312 Occupation Aggregate Year-to-Date ▼	Date of Receipt O2 O7 2014 Transaction ID: 40217.C4548 Amount of Each Receipt this Period 2500.00 Receipt
Full Name (Last, First, Middle Initial) MFA PAC Mailing Address PO Box 21664 City ROANOKE FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code VA 24018 C C00467639 Occupation Aggregate Year-to-Date ▼	Date of Receipt 02 07 2014 Transaction ID: 40217.C4551 Amount of Each Receipt this Period 5000.00 Receipt
SUBTOTAL of Receipts This Page (optional)		▶ 8500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 15 (check only one) 11a 11b X 11c 12 13 14 15 16 17
	y information copied from such Reports and Si for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) ORRINPAC			
Α.	Full Name (Last, First, Middle Initial) The AES Corporation PAC			Date of Receipt
	Mailing Address 4300 Wilson Boulevard			02 17 2014
	City	State	Zip Code	Transaction ID : 40220.C4555
	ARLINGTON	VA	22203	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0507962	1000.00
	Name of Employer	Occupation	1	Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
— В.	Full Name (Last, First, Middle Initial) Varian Medical Systems PAC			Date of Receipt
	Mailing Address 525 9th Street, NW Suite 450			02 24 2014
	City	State DC	Zip Code	Transaction ID : 40312.C4562
	WASHINGTON	DC	20004-2178	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0450965	2500.00
	Name of Employer	Occupation	1	Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	
_	Full Name (Last, First, Middle Initial)			Date of Brasin
C.	Mailing Address			Date of Receipt
City		State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional))	3500.00

28000.00

S ľ

S	CHEDULE B (FEC Form 3X)					LINE NUMBER: PAGE 11 OF 15							15
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	1 ·	(check only o			22	23 24 25				26
			Summary Page	<u>×</u>	21b 27	22 28a	$\mid - \mid$	23 28b		24 28c	25	H	26 30b
Aı	ny information copied from such Reports and Statem	nents may	not be sold or use	ed by an			purp		of so			utions	
	for commercial purposes, other than using the name												
$ \setminus $	NAME OF COMMITTEE (In Full)												
$ \rangle$	ORRINPAC												
<u></u>	Full Name (Last, First, Middle Initial)												
Α.	First Bankcard					Date o	f Dis	burse	mer	nt			
	Mailing Address PO Box 2818					02	/	2		/ Y	2014	Y	
	maining / tearlood O Box 2010					ÜZ.		-	•		2014		
		State	Zip Code			Trans	sactio	on ID	: 40	312.E2	805		
	OMAHA Purpose of Disbursement	NE	68103-2818										
	Credit Card Payment: See Below					Amoun	t of I	Each	Disl	ourseme	ent this	Perio	d
	Candidate Name			Catego	ry/		-	-			11	0.04	П
	Office Sought: House Disbursen	oost Farr		Туре				7		7	41	8.04	_
	Office Sought: House Disbursen Senate	nent For: Primary	General			CDEDI	T C ^	ם חם	Λ ∨ r	AENIT: C	SEE BEI	\cap	
	President	Other (spe				ONEDI	· CA	יאט אי	r3 I IV	1L1VI. 3	,LE DEI	_OVV	
_	State: District:												
В	Full Name (Last, First, Middle Initial)					Data a	4 D:-	ha					
О.	Montage Deer Valley					Date o		burse			Y	V	
	Mailing Address 9100 Marsac Avenue PO Box 4680					01		0			2014		
	•	State	Zip Code			Trans	sacti	on ID	: 40	312.E2	2809		
	PARK CITY Purpose of Disbursement	UT	84060-										
	PAC Event					Amoun	t of I	Each	Disl	ourseme	ent this	Perio	d
	Candidate Name			Catego							36	64.90	П
	Office Sought: House Disbursen	nont For:		Туре				7		7		71.00	-
		Primary	General			[MEMO			NT				
		Other (spe	cify) 🔻			WEWO	. 1 /	<i>,</i>					
_	State: District:												
_	Full Name (Last, First, Middle Initial)					Date o	f Die	hurea	mar	nt			
Ο.	ARISTOTLE					M M	/ 013	D	_		Y	V	
	Mailing Address 205 Pennsylvania Ave, SE					02]	04		Ĺ	2014		
	City	State	Zip Code										
	WASHINGTON	DC	20003-			Trans	sacti	on ID	: 40)312.E2	:800		
	Purpose of Disbursement Software												
	Candidate Name			0-1		Amoun	t of I	Each	Dist	urseme	ent this	Perio	d
				Catego Type				m		(1)	57	5.00	
	Office Sought: House Disbursen												
	Senate President	Primary Other (spe	General			SOFTW	VARE						
	State: District:	Cirici (Spe	ony) ▼										
Г	1						-	-	-		_		Ŧ
5	SUBTOTAL of Disbursements This Page (optional)				•			,		7	99:	3.04	
Γ.	OTAL This Povind (lost none this line number and)												7
l '	OTAL This Period (last page this line number only)							,		- 7			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) ORRINPAC Full Name (Last, First, Middle Initial)	S	CHEDULE B (FEC Form 3X)	lles ser	ovoto oob = did = (-)	FOR LINE NUMBER: PA					OF 15
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) ORRINPAC Full Name (Last, First, Middle Initial) A. E. H. MURRAY GROUP, LLC Mailing Address esto ANNA MARIE COURT City State Zp Code WA Z2101- Purpose of Disbursement Port Purpose of Disbursement Fort State: Purpose of Disbursement Fort State: Persident Disduction of Disbursement Catagogry 1)999 Amount of Each Disbursement State: City State Zp Code Office Sought: Full Name (Last, First, Middle Initial) B. First Bankcard Mailing Address PO Box 2818 City State Zp Code OMAHA NE 88103-2818 Purpose of Disbursement Cotter (specify) Transaction ID: 40312.E2806 Amount of Each Disbursement Cotter (Specify) Transaction ID: 40312.E2806 Amount of Each Disbursement Cotter (Specify) Transaction ID: 40312.E2806 Amount of Each Disbursement Cotter (Specify) Transaction ID: 40312.E2806 Amount of Each Disbursement Cotter (Specify) Transaction ID: 40312.E2806 Amount of Each Disbursement Cotter (Specify) Transaction ID: 40312.E2806 Amount of Each Disbursement District: Full Name (Last, First, Middle Initial) C. Montage Deer Valley Mailing Address 9100 Marsac Avenue PO Box 4880 City State Zp Code Chargopy Type Date of Disbursement Category' Type Transaction ID: 40312.E2802 Amount of Each Disbursement Category' Type Transaction ID: 40312.E2802 Amount of Each Disbursement Port Category' Type Transaction ID: 40312.E2802 Amount of Each Disbursement Port Category' Type Transaction ID: 40312.E2802 Amount of Each Disbursement Port Category' Type Transaction ID: 40312.E2802 Amount of Each Disbursement Port Category' Type Transaction ID: 40312.E2802 Transaction ID: 40312.E2802 Amount of Each Disbursement Port Category' Type District: District: Substract Port Category' Disb	IT	EMIZED DISBURSEMENTS	for each	category of the	· ·		22	□ 24 「	25	26
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) ORRINPAC Full Name (Last, First, Middle Initial) A. E. H. MURRAY GROUP, LLC Mailing Address 6510 ANNA MARIE COURT City MC LEAN VA 22101- Purpose of Disbursement Fundraling Consulting Cardidate Name Category/ Type Disbursement For: Full Name (Last, First, Middle Initial) B. First Bankcard Mailing Address Po Box 2818 City ONAHA Malling Address Po Box 2818 City ONAHA Malling Address Po Box 2818 City Cardidate Name Cardidate Name Category/ Type Disbursement City ONAHA Malling Address Po Box 2818 Disbursement City Cardidate Name Cardidate Name Cardidate Name Cardidate Name Cardidate Name Cardidate Name Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type CREDIT CARD PAYMENT: SEE BELOW Disbursement Category/ Type CREDIT CARD PAYMENT: SEE BELOW Disbursement Category/ Type CREDIT CARD PAYMENT: SEE BELOW Transaction ID: 40312,E2806 Amount of Each Disbursement CREDIT CARD PAYMENT: SEE BELOW Distorts Transaction ID: 40312,E2806 Amount of Each Disbursement CREDIT CARD PAYMENT: SEE BELOW Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312,E2806 Amount of Each Disbursement Category/										
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) ORRINPAC Full Name (Last, First, Middle Initial) A. E. H. MURRAY GROUP, LLC Mailing Address 6510 ANNA MARIE COURT City MC LEAN VA 22101- Purpose of Disbursement Fundralising Consulting Cardiddate Name Category/ Type District Full Name (Last, First, Middle Initial) B. First Bankcard Mailing Address Po Box 2818 City ONAHA Maling Address Po Box 2818 City ONAHA Maling Address Po Box 2818 City ONAHA NE Bislos-2218 Fundralising Consulting Cardiddate Name Category/ Type Disbursement City ONAHA Maling Address Po Box 2818 City ONAHA NE Bislos-2218 Fundralising Consulting Cardiddate Name Category/ Type Cardiddate Name Category/ Type Transaction ID: 40312.E2806 Amount of Each Disbursement this Period Category/ Type CREDIT CARD PAYMENT: SEE BELOW Disbursement CREDIT CARD PAYMENT: SEE BELOW Transaction ID: 40312.E2802 Amount of Each Disbursement CREDIT CARD PAYMENT: SEE BELOW Transaction ID: 40312.E2802 Amount of Each Disbursement Category/ Type Date of Disbursement CREDIT CARD PAYMENT: SEE BELOW Transaction ID: 40312.E2802 Amount of Each Disbursement Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement District: Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement District: Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement District: Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement District: Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement District: Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement District: Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement District: Category/ Type Transa	Ar	y information copied from such Reports and Staten	nents may	not be sold or us	ed by any perso	on for the	purpose	of soliciting	contribu	ıtions
ORRINPAC Full Name (Last, First, Middle Initial) A. E. H. MURRAY GROUP, LLC Mailing Address 6510 ANNA MARIE COURT City MC LEAN VA Z101- Purpose of Disbursement Prissident State Prissident Disbursement Prissident Disbursement Other (specify) Transaction ID: 40312.E2801 Amount of Each Disbursement this Period Category/ 1999 FUNDRAISING CONSULTING FUNDRAISING CONSULTING Transaction ID: 40312.E2801 Amount of Each Disbursement this Period Category/ 1990 FUNDRAISING CONSULTING FUNDRAISING CONSULTING Transaction ID: 40312.E2806 FUNDRAISING CONSULTING FUNDRAISING CONSULTING Transaction ID: 40312.E2806 Amount of Each Disbursement Q2 Z4 Z014 Transaction ID: 40312.E2806 Amount of Each Disbursement this Period Cardidate Name Category/ Type Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Condidate Name Category/ Type Transaction ID: 40312.E2806 Amount of Each Disbursement this Period Category/ Type Transaction ID: 40312.E2806 Transaction ID: 40312.E2806 Transaction ID: 40312.E2806 Transaction ID: 40312.E2806 Amount of Each Disbursement this Period Category/ Type Transaction ID: 40312.E2806 Transaction ID: 40312.E2806 Transaction ID: 40312.E2807 Transaction ID: 40312.E2802		for commercial purposes, other than using the name								
Full Name (Last, First, Middle Initial) A. E. H. MURRAY GROUP, LLC Mailing Address 6510 ANNA MARIE COURT City City City City Compose of Disbursement Foundaising Consulting Candidate Name Cardidate Name Cardidate Name City City Senate Primary Senate Primary State City Collegory/ Office Sought: Full Name (Last, First, Middle Initial) B. First Bankcard Mailing Address PO Box 2818 City Compose of Disbursement City Collegory/ Office Sought: Full Name Cardidate Nam		` '								
A. E. H. MURRAY GROUP, LLC Mailing Address 6610 ANNA MARIE COURT City State Zip Code VA 22101- Purpose of Disbursement Fundraising Consulting Candidate Name Office Sought: House President Disbursement For: Senate President District. Full Name (Last, First, Middle Initial) State: District: Senate Primary General Primary State Office Sought: House Below Cardidate Name Category/ Type Transaction ID : 40312,E2801 Amount of Each Disbursement this Period Date of Disbursement Berond Transaction ID : 40312,E2806 Amount of Each Disbursement this Period Category/ Type Office Sought: House Below Cardidate Name Category/ Type Office Sought: President Primary General Primary General President State: District: Full Name (Last, First, Middle Initial) C. Montage Deer Valley Mailing Address 9100 Marsac Avenue Po Box 4680 City State: District: Transaction ID : 40312,E2802 Transaction ID : 40312,E2802 Transaction ID : 40312,E2802 Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate President State: District: Primary General Prim	$ \rangle$	ORRINPAC								
A. E. H. MURRAY GROUP, LLC Mailing Address 6610 ANNA MARIE COURT City State Zip Code VA 22101- Purpose of Disbursement Fundraising Consulting Candidate Name Office Sought: House President Disbursement For: Senate President District. Full Name (Last, First, Middle Initial) State: District: Senate Primary General Primary State Office Sought: House Below Cardidate Name Category/ Type Transaction ID : 40312,E2801 Amount of Each Disbursement this Period Date of Disbursement Berond Transaction ID : 40312,E2806 Amount of Each Disbursement this Period Category/ Type Office Sought: House Below Cardidate Name Category/ Type Office Sought: President Primary General Primary General President State: District: Full Name (Last, First, Middle Initial) C. Montage Deer Valley Mailing Address 9100 Marsac Avenue Po Box 4680 City State: District: Transaction ID : 40312,E2802 Transaction ID : 40312,E2802 Transaction ID : 40312,E2802 Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate President State: District: Primary General Prim	<u></u>	Full Name (Last, First, Middle Initial)			İ					
Mailing Address 6510 ANNA MARIE COURT	A.	,				Date of	Disburse	ement		
City MC LEAN Purpose of Disbursement Fundraising Consulting Candidate Name Candidate Name Category' Office Sought: House President President Disbursement For: Senate President Office Sought: Annual of Each Disbursement For: City Purpose of Disbursement President Disbursement For: State: Disbursement City State: Disbursement Credit Card Payment: See Below Candidate Name Category' Transaction ID: 40312.E2801 Amount of Each Disbursement Date of Disbursement Transaction ID: 40312.E2806 FUNDRAISING CONSULTING Date of Disbursement Date of Disbursement Transaction ID: 40312.E2806 FUNDRAISING CONSULTING Date of Disbursement Category' Transaction ID: 40312.E2806 Transaction ID: 40312.E2806 Amount of Each Disbursement this Period Category' Transaction ID: 40312.E2806 Transaction ID: 40312.E2807 Transaction										Y
MCLEAN Purpose of Disbursement Fundraising Consulting Candidate Name Office Sought: House President State: Disbursement For: Other (specify) ▼ Full Name (Last, First, Middle Initial) Purpose of Disbursement State: Disbursement Category/ Type Office Sought: President State President State Zip Code NE 68103-2818 Transaction ID: 40312,E2806 Amount of Each Disbursement Category/ S000.00 FUNDRAISING CONSULTING FUNDRAISING CONSULTI		Mailing Address 6510 ANNA MARIE COURT				02	Q)5	2014	
MCLEN Purpose of Disbursement Fundralising Consulting Candidate Name Category/ Type District: Full Name (Last, First, Middle Initial) Candidate Name District: Full Name (Last, First, Middle Initial) Credit Card Payment: See Below Candidate Name Category/ Type Date of Disbursement Transaction ID: 40312.E2806 Amount of Each Disbursement Transaction ID: 40312.E2806 Amount of Each Disbursement Category/ Type Transaction ID: 40312.E2806 Amount of Each Disbursement Category/ Type Category/ Type Credit Card Payment: See Below Candidate Name Disbursement For: General Other (specify) ▼ Category/ Type Credit Card Payment: See Below Candidate Name Category/ Type Credit Card Payment: See Below Candidate Name Category/ Type Credit Card Payment: See Below Candidate Name Category/ Type Date of Disbursement this Period Category/ Type CREDIT CARD PAYMENT: SEE BELOW Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement Category/ Type Date of Disbursement this Period Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement Category/ Type Office Sought: House Sanate Primary General Other (specify) ▼ Date of Disbursement this Period Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement this Period Category/ Type Office Sought: House Sanate Primary General Other (specify) ▼ Date of Disbursement this Period Category/ Type Office Sought: Date of Disbursement this Period Category/ Type Office Sought: Transaction ID: 40312.E2802 Amount of Each Disbursement this Period Category/ Type Office Sought: Date of Disbursement this Period Category/ Type Office Sought: Date of Disbursement this Period Category/ Type Office Sought: Date of Disbursement this Period Category/ Type Office Sought: Date of Disbursement this Period Category/ Type Office Sought: Date of Disbursement this Period Category/ Type Office Sought:		City	State	Zip Code		T	antie : In	. 40242 52	004	
Fundraising Consulting Candidate Name Category/ Type Office Sought:			VA	22101-		irans	action ID	. 40312.E2	DU I	
Candidate Name Category/ Type South Senate Prisident P						Amount	of Fach	Dishurseme	ent this	Period
Office Sought:					Category/		. J. Laon	2.0301001110		
Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) B. First Bankcard Mailing Address PO Box 2818 City OMAHA Credit Card Payment: See Below Candidate Name Condidate Name Condidate Name Condidate Name Condidate Name Condidate Name Condidate Name Full Name (Last, First, Middle Initial) Senate President Other (specify) ▼ Condidate Name Condida							-,		800	0.00
State: District: Full Name (Last, First, Middle Initial) B. First Bankcard Mailing Address PO Box 2818 City OMAHA NE 68103-2818 Purpose of Disbursement Credit Card Payment See Below Candidate Name Candidate Name Disbursement For: President President Prosential Other (specify) ▼ Mailing Address 9100 Marsac Avenue PO Box 4680 City State Zip Code Amount of Each Disbursement this Period Cartegory/ Type Credit Card Payment See Below Credit Card Payment										
State: District: Full Name (Last, First, Middle Initial) B. First Bankcard Mailing Address PO Box 2818 City			•			FUNDR	AISING C	CONSULTIN	G	
B. First Bankcard Mailing Address PO Box 2818 City OMAHA NE 68103-2818 Purpose of Disbursement Credit Card Payment: See Below Candidate Name Category/ Type Disbursement For: Senate Primary General Other (specify) ▼ Transaction ID: 40312.E2806 Amount of Each Disbursement this Period CREDIT CARD PAYMENT: SEE BELOW CREDIT CARD PAYMENT: SEE BELOW Date of Disbursement this Period Amount of Each Disbursement this Period CREDIT CARD PAYMENT: SEE BELOW Date of Disbursement this Period CREDIT CARD PAYMENT: SEE BELOW Transaction ID: 40312.E2802 Amount of Each Disbursement Date of Disbursement this Period Category/ Disbursement this Period Category/ Type Office Sought: House Primary General Primary General Primary General Primary General Other (specify) ▼ State: District: Substortal of Disbursement this Period Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement this Period Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement this Period Category/ Type Office Sought: House Primary General Other (specify) ▼ State: District: Substortal of Disbursements This Page (optional)			Outer (She	∪y) ▼						
Mailing Address PO Box 2818 City	_	Full Name (Last, First, Middle Initial)								
City OMAHA NE 68103-2818 Purpose of Disbursement Credit Card Payment: See Below Candidate Name Candidate Name District: Full Name (Last, First, Middle Initial) C. Montage Deer Valley Mailling Address 9100 Marsac Avenue PO Box 4680 City PARK CITY Purpose of Disbursement Candidate Name City Po Box 4680 City P	В.	First Bankcard				Date of	Disburse	ement		
City OMAHA Purpose of Disbursement Credit Card Payment: See Below Candidate Name Category/ Office Sought: Full Name (Last, First, Middle Initial) C. Montage Deer Valley Mailling Address 9100 Marsac Avenue PO Box 4680 City PARK CITY Purpose of Disbursement PAC Event Candidate Name Disbursement For: Category/ Type Transaction ID : 40312.E2806 Amount of Each Disbursement this Period CREDIT CARD PAYMENT: SEE BELOW Date of Disbursement Transaction ID : 40312.E2806 Amount of Each Disbursement this Period CREDIT CARD PAYMENT: SEE BELOW Transaction ID : 40312.E2802 Transaction ID : 40312.E2802 Transaction ID : 40312.E2802 Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General Other (specify) Transaction ID : 40312.E2802 Amount of Each Disbursement this Period Category/ Type PAC EVENT State: District: District: SUBTOTAL of Disbursements This Page (optional)		Mailing Address DO Day 2040								Υ
OMAHA Purpose of Disbursement Credit Card Payment: See Below Candidate Name Category/ Type Office Sought:		wailing Address PO Box 2818				02	4	:4	∠014	_
OMAHA Purpose of Disbursement Credit Card Payment: See Below Candidate Name Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. Montage Deer Valley Mailing Address 9100 Marsac Avenue PO Box 4680 City PARK CITY Purpose of Disbursement PAC Event Candidate Name Disbursement For: Senate District: Category/ Type CREDIT CARD PAYMENT: SEE BELOW Date of Disbursement Transaction ID: 40312.E2802 Amount of Each Disbursement this Period CREDIT CARD PAYMENT: SEE BELOW Transaction ID: 40312.E2802 Amount of Each Disbursement Category/ Type Transaction ID: 40312.E2802 Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: Senate President Other (specify) ▼ SubTOTAL of Disbursements This Page (optional)				•		Trans	action ID) : 40312.E2	806	
Credit Card Payment: See Below Candidate Name Category/ Type Office Sought:			NE	68103-2818						
Office Sought: House Senate President State: District: Senate Propose of Disbursement PAC Event Candidate Name Office Sought: House Senate Primary General Other (specify) Type Date of Disbursement Date of Disbursemen		·				Amount	t of Each	Disburseme	ent this	Period
Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Montage Deer Valley Mailing Address 9100 Marsac Avenue PO Box 4680 City State Zip Code PARK CITY UT 84060- Purpose of Disbursement PAC Event Candidate Name Category/ Type Office Sought: House President Primary General Primary General Primary General President State: District: SUBTOTAL of Disbursements This Page (optional)		Candidate Name			Category/				47	2 4F
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Montage Deer Valley Mailing Address 9100 Marsac Avenue PO Box 4680 City State Zip Code UT 84060- Purpose of Disbursement PAC Event Candidate Name Category/ Office Sought: House Primary General Other (specify) Senate Primary General Other (specify) Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)		Office County					- 7	7	17.	∠. 4ህ
State: District: Full Name (Last, First, Middle Initial) C. Montage Deer Valley Mailing Address 9100 Marsac Avenue PO Box 4680 City PARK CITY Purpose of Disbursement PAC Event Candidate Name Office Sought: House President State: District: Other (specify) Date of Disbursement M M M O2 05 / 2014 Transaction ID: 40312.E2802 Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)				General		CDEDI	L C V D D .) A V N 4 C P 1 T - C	יבר חרי	OW.
State: District: Full Name (Last, First, Middle Initial) C. Montage Deer Valley Mailing Address 9100 Marsac Avenue PO Box 4680 City PARK CITY Purpose of Disbursement PAC Event Candidate Name Candidate Name Disbursement For: Senate President State: District: Substotal of Disbursements This Page (optional)			,			CKEDI	I CARD F	AYWENT: S	occ RFI	-044
Mailing Address 9100 Marsac Avenue PO Box 4680 City PARK CITY Purpose of Disbursement PAC Event Candidate Name Disbursement For: Senate President State: District: Date of Disbursement 02 05 2014 Transaction ID: 40312.E2802 Amount of Each Disbursement this Period Category/ Type PAC EVENT PAC EVENT Substitute: Substitute: Disbursements This Page (optional)	_		` '	• • •						
Mailing Address 9100 Marsac Avenue PO Box 4680 City PARK CITY UT 84060- Purpose of Disbursement PAC Event Candidate Name Category/ Type Office Sought: House President State: District: Substortal of Disbursements This Page (optional)	_	,								
Mailing Address 9100 Marsac Avenue PO Box 4680 City PARK CITY UT 84060- Purpose of Disbursement PAC Event Candidate Name Candidate Name O2 05 2014 Transaction ID : 40312.E2802 Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General President President State: District: Subtrotal of Disbursements This Page (optional)	C.	Montage Deer Valley					_			
City State Zip Code PARK CITY UT 84060- Purpose of Disbursement PAC Event Candidate Name Candidate Name Category/ Type Office Sought: House Primary General Other (specify) State: District: Substitute In the page (optional)		Mailing Address 9100 Marsac Avenue								Y
PARK CITY Purpose of Disbursement PAC Event Candidate Name Category/ Type Office Sought: House Senate Primary President State: District: Substrotal of Disbursements This Page (optional)		PO Box 4680								
Purpose of Disbursement PAC Event Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substrict: Primary General Other (specify) ▼ Substrict: Primary General Other (specify) ▼ Substrict: Primary General Other (specify) ▼ 16811.92						Trans	action ID	: 40312.E2	802	
Candidate Name Category/ Type Category/ Type Category/ Type Beach Disbursement this Period Category/ Type Category/ Type Primary General Other (specify) ▼ Subtrotal of Disbursements This Page (optional)		Purpose of Disbursement	<u> </u>	04000-						
Office Sought: House Senate Primary General Other (specify) State: District: Substitute: Disbursements This Page (optional)						Amount	t of Each	Disburseme	ent this	Period
Office Sought: House Senate Primary General Other (specify) State: District: PAC EVENT SUBTOTAL of Disbursements This Page (optional)		Candidate Name							863	9.47
Senate Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)		Office Sought: House Disburser	nent For:		Гуре		- 7	7	500	
State: District: Other (specify) SUBTOTAL of Disbursements This Page (optional)				General		PAC FV	/ENT			
SUBTOTAL of Disbursements This Page (optional)		President	-	cify) 🔻		. 7.0 L				
SUBTOTAL OF DISDUISEMENTS THIS Page (Optional)		State: District:								
SUBTOTAL OF DISDUISEMENTS THIS Page (Optional)									1601	02
TOTAL This Period (last page this line number only)	L	UBTOTAL of Disbursements This Page (optional)			·····•		- 1	7	1001	.32
	1	OTAL This Period (last page this line number only)								

SCHEDULE B (FEC Form 3X)		FOR LINE I	PAGE 13 OF 15			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	check only one)			
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30		
Any information copied from such Reports and Staten	nents may not be sold or uses					
or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)						
ORRINPAC						
Full Name (Last, First, Middle Initial)			Date of Disburse			
A. Soapbox Strategies Interactive	Soapbox Strategies Interactive					
Mailing Address PO Box 15223			02 2			
City.	State Zin Code					
City S WASHINGTON	State Zip Code DC 20003-		Transaction ID	: 40312.E2804		
Purpose of Disbursement	20003					
Email List Hosting			Amount of Each	Disbursement this Period		
Candidate Name		Category/		20.00		
		Туре		83.33		
Office Sought: House Disburser						
	Primary General		EMAIL LIST HOS	TING		
State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
B.			Date of Disburse	ment		
			M M / D			
Mailing Address						
City	State Zip Code					
Purpose of Disbursement	_					
. 5. post of 2.054100110111			Amount of Each	Disbursement this Period		
Candidate Name		Category/				
		Type				
Office Sought: House Disburser	nent For:					
Senate	Primary General					
President Pictriot:	Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) C.			Date of Disburse	ment		
			M M / D			
Mailing Address						
City	State Zip Code					
Purpose of Disbursement						
Canadialata Nama			Amount of Each	Disbursement this Period		
Candidate Name		Category/				
Office Sought: House Disburser	nent For:	Туре				
	Primary General					
President	Other (specify) ▼					
State: District:	• • • •					
SUBTOTAL of Disbursements This Page (optional)				83.33		
<u> </u>				17000.00		
TOTAL This Period (last page this line number only)				17888.29		

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) ORRINPAC	nents may not be sold or used the and address of any political	by any perso committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) A. McFadden for Senate Mailing Address PO Box 4039	McFadden for Senate			
City	State Zip Code MN 55104-		02 04 2014 Transaction ID : 40807.E2900	
Purpose of Disbursement PRIMARY 2014 Candidate Name MICHAEL MCFADDEN Office Sought: House Disbursen Senate		Category/ Type	Amount of Each Disbursement this Period 5000.00 PRIMARY 2014	
Full Name (Last, First, Middle Initial) B. Mailing Address			Date of Disbursement	
Purpose of Disbursement Candidate Name Office Sought: House Disbursem Senate		Category/ Type	Amount of Each Disbursement this Period	
State: District: Full Name (Last, First, Middle Initial) Mailing Address	V-E 27. ▼		Date of Disbursement	
City S Purpose of Disbursement	State Zip Code			
Candidate Name	[Category/ Type	Amount of Each Disbursement this Period	
	nent For: Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)			5000.00	
TOTAL This Period (last page this line number only)			5000.00	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 15 OF 15	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	(check only one)	
		21b 27	22 23 24 25 26 28a 28b 28c X 29 30	
Any information copied from such Reports and State	ments may not be sold or us	sed by any perso		
or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
ORRINPAC				
Full Name (Last, First, Middle Initial)				
A. Kelly Ayotte Legal Expense Trust Fund			Date of Disbursement	
Mailing Address 3000 K Street, NW			02 04 2014	
Suite 600	7: 0			
City WASHINGTON	State Zip Code DC 20007-		Transaction ID: 40808.E2917	
Purpose of Disbursement				
DONATION		Amount of Each Disbursement this Period		
Candidate Name Category/		10000.00		
Office Sought: House Disburser	ment For:	туре		
Senate	Primary General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
3.			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
			Amount of Each Disbursement this Period	
Candidate Name Category/				
Office Sought: House Disburse	ment For:	Туре		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address				
City	State Zip Code			
Diverse of Dishurse mant				
Purpose of Disbursement			Amount of Each Disbursement this Period	
Candidate Name Category/			Amount of Each Disbursement this Period	
		Type		
Office Sought: House Disburser Senate	ment For:			
President	Primary General Other (specify) ▼			
State: District:	- · · (-p)/ ▼			
SUBTOTAL of Disbursements This Page (optional)		············	10000.00	
TOTAL This Period (last page this line number only	1		10000.00	